



Fort Bend County Fair Mutton Bustin' 2025 Official Entry Form



Rider's Name: _____

Parent/Legal Guardian Name: _____

Rider's Age (4-7): _____ Date of Birth: _____ Weight (fully clothed): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Cell: (____) _____

Email: _____

School: _____

Please indicate your 1st, 2nd and 3rd preference below.

Order placement will be determined on a first come first serve basis.

_____ Friday, September 26th

_____ Friday, October 3rd

_____ Saturday September 27th Matinee

_____ Saturday, September 27th

_____ Saturday, October 4th

**PLEASE NOTE THAT THE ENTRY FORM, RELEASE OF LIABILITY, AND
ENTRY FEE MUST BE RECEIVED ONLINE!**

EMAIL – RODEO@FBCFA.ORG WITH ANY QUESTIONS YOU MAY HAVE